PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

6680,036

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			31				Г	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA	В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			3/ minus 20= *		* /	11		X\$ 9=	99	OR	X\$18=	-
INDEPENDENT CLAIMS			5 minus 3 = * 0			2		X42≈	84	OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=	, ,	OR	+280=	-
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				Ļ	TOTAL	553	OR	TOTAL	
CLAIMS AS AMENDED - PART II										OR	OTHER	
		(Column 1)		(Column 2) (Column 3)				SMALL ENTITY			SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
AME	Independent	* ENTATION OF MI	Minus	***	r CL AIM	=		X42=		OR	X84=	
	TINOT FRESE	INTATION OF IM	OLTIPLE DE	FENDEN	CLANVI			+140≈		OR	+280=	
							L	TOTAL		OR	TOTAL	
		(0.1		(0-1	01	(0.1	AD	DIT. FEE		.	ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)			4551			455.
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
_	THEST PRESE	NTATION OF M	JUITPLE DE	PENDEN	CLAIM			⊦140 =		OR	+280=	
							L_ AD	TOTAL DIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	<i>ا</i> لم	D11.7 CE 1			ADDII. 1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OB	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		-
* 1	If the entry in eals	mp 1 is less than the	he entry in co	lumn 2 weite	a "O" in ool	timn 3	Ŀ	140≃		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					r found	in the app	ropriate box	c in col	umn 1.	